Illinois EPA
Modified Form A

POTW OWNER NAME: City of Robinson WWTF
NPDES NUMBER:IL0030732
FACILITY NAME: Robinson
REPORT PERIOD: FROM: 1/1/21   TO: 12/31/21

1.   GENERAL INFORMATION:
   a. SIU Status: Existing: _X__   New:___   Delete:___   Name Change:___
          Comments:

   b. Name: Hershey Chocolate USA
       Local Permit Number: RHC20
   c. Street/P.O. Box: 1401 West Main Street
       City: Robinson
       State: IL
       Zip Code: 62454
       Telephone: (618) 544-3111
   d. Tributary POTW NPDES permit number: IL0030732
   e.   Categorical Pretreatment Standard(s) – 40 CFR: None

2.   COMPLIANCE SUMMARY:

   a. Total number of compliance samples collected by POTW and SIU: 1236
   b. Total number of violations noted by POTW and SIU: 0
   c. Total fines collected beyond typical user charges (dollars):$ 0
   d. During the period covered by this report was the SIU in significant noncompliance
       as defined by 40CFR 403.8(f)(2)(vii)?   Yes: ____ No: __X__
   e. Was the SIU published by the POTW in the newspaper: Yes: ____ No: __X__
   f.   Is the SIU currently in compliance?   Yes: __X__ No: ____

3. NARRATIVE SUMMARY:
   Carefully review the instructions to determine what must be discussed.
    If none of the instruction items (a-j) apply, check none here: _X__ NONE

SUMMARY:

<div align="center">**Illinois EPA**
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1. GENERAL INFORMATION:
    a. SIU Status: Existing: _X__   New:___   Delete:___   Name Change:___
        Comments:

    b. Name: Robinson Correctional Center
        Local Permit Number: RC20
    c. Street/P.O. Box: P.O. Box 1000
        City: Robinson
        State: IL
        Zip Code: 62454
        Telephone: (618) 546-5659
    d. Tributary POTW NPDES permit number: IL0030732
    e.   Categorical Pretreatment Standard(s) – 40 CFR: None

2.   COMPLIANCE SUMMARY:

    a. Total number of compliance samples collected by POTW and SIU: 635
    b. Total number of violations noted by POTW and SIU: 4
    c. Total fines collected beyond typical user charges (dollars):$ 0.00
    d. During the period covered by this report was the SIU in significant noncompliance
        as defined by 40CFR 403.8(f)(2)(vii)?   Yes: ____ No: __X_
    e. Was the SIU published by the POTW in the newspaper: Yes: ___ No: __X__
    f. Is the SIU currently in compliance?   Yes: __X__ No: ____

3. NARRATIVE SUMMARY:
    Carefully review the instructions to determine what must be discussed.
     If none of the instruction items (a-j) apply, check none here: _X__ NONE

SUMMARY:

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1. GENERAL INFORMATION:
    a. SIU Status: Existing: _X__ New:___   Delete:___   Name Change:___
        Comments:

    b. Name: E.H. Baare Corp.
        Local Permit Number: RB20
    c. Street/P.O. Box: 500 Heath Toffee Ave.
        City: Robinson
        State: IL
        Zip Code: 62454
        Telephone: (618) 546-1575
    d. Tributary POTW NPDES permit number: IL0030732
    e. Categorical Pretreatment Standard(s) – 40 CFR: 433, Metal Finishing

2. COMPLIANCE SUMMARY:

    a. Total number of compliance samples collected by POTW and SIU: 443
    b. Total number of violations noted by POTW and SIU: 5
    c. Total fines collected beyond typical user charges (dollars): $ 600.00
    d. During the period covered by this report was the SIU in significant noncompliance
        as defined by 40CFR 403.8(f)(2)(vii)?   Yes: ____ No: __X__
    e. Was the SIU published by the POTW in the newspaper: Yes: ____ No: __X__
    f. Is the SIU currently in compliance?   Yes: _X__ No: ____

3. NARRATIVE SUMMARY:
    Carefully review the instructions to determine what must be discussed.
     If none of the instruction items (a-j) apply, check none here: _X__ NONE

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4.   GENERAL INFORMATION:
  f. SIU Status: Existing: _X__ New:___ Delete:___ Name Change:___
       Comments:

  g. Name: Linde Gases North America
      Local Permit Number: RLG20
  h. Street/P.O. Box: 1100 E. Victor Dana Road
      City: Robinson
      State: IL
      Zip Code: 62454
      Telephone: (618) 544-2500
  i. Tributary POTW NPDES permit number: IL0030732
  j.   Categorical Pretreatment Standard(s) – 40 CFR: 415, Inorganic Chemical Mfg.

5.   COMPLIANCE SUMMARY:

  e. Total number of compliance samples collected by POTW and SIU: 42
  f. Total number of violations noted by POTW and SIU: 0
  g. Total fines collected beyond typical user charges (dollars): $ 0.00
  h. During the period covered by this report was the SIU in significant noncompliance
      as defined by 40CFR 403.8(f)(2)(vii)?   Yes: ____ No: __X__
  e. Was the SIU published by the POTW in the newspaper: Yes: ____ No: __X__
  f. Is the SIU currently in compliance?   Yes: _X__ No: ____

6. NARRATIVE SUMMARY:
   Carefully review the instructions to determine what must be discussed.
    If none of the instruction items (a-j) apply, check none here: _X__ NONE

SUMMARY:
Initial permit became valid on 12/1/2020.

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7.   GENERAL INFORMATION:
   k. SIU Status: Existing: _X__   New:___   Delete:___   Name Change:___
       Comments:

   l. Name: Crawford Memorial Hospital
       Local Permit Number: RH20
   m. Street/P.O. Box: 1000 N. Allen St.
       City: Robinson
       State: IL
       Zip Code: 62454
       Telephone: (618) 544-3131
   n. Tributary POTW NPDES permit number: IL0030732
   o. Categorical Pretreatment Standard(s) – N/A

8.   COMPLIANCE SUMMARY:

   i.   Total number of compliance samples collected by POTW and SIU: 41
   j.   Total number of violations noted by POTW and SIU: 1
   k.   Total fines collected beyond typical user charges (dollars): $ 0.00
   l.   During the period covered by this report was the SIU in significant noncompliance
        as defined by 40CFR 403.8(f)(2)(vii)?   Yes: ____ No: __X__
   e.   Was the SIU published by the POTW in the newspaper: Yes: ____ No: __X__
   f.   Is the SIU currently in compliance?   Yes: _X__ No: ____

9. NARRATIVE SUMMARY:
    Carefully review the instructions to determine what must be discussed.
     If none of the instruction items (a-j) apply, check none here: _X__ NONE

SUMMARY:

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10. GENERAL INFORMATION:
   p. SIU Status: Existing: _X__ New:___ Delete:___ Name Change:___
       Comments:

   q. Name: Dana Sealing Mfg. LLC
       Local Permit Number: RD20
   r. Street/P.O. Box: 1201 E. Victor Dana Road
       City: Robinson
       State: IL
       Zip Code: 62454
       Telephone: (618) 544-8651
   s. Tributary POTW NPDES permit number: IL0030732
   t.   Categorical Pretreatment Standard(s) – N/A

11. COMPLIANCE SUMMARY:

   m. Total number of compliance samples collected by POTW and SIU: 43
   n. Total number of violations noted by POTW and SIU: 0
   o. Total fines collected beyond typical user charges (dollars): $ 0.00
   p. During the period covered by this report was the SIU in significant noncompliance
      as defined by 40CFR 403.8(f)(2)(vii)?   Yes: ____ No: __X__
   e. Was the SIU published by the POTW in the newspaper: Yes: ____ No: __X__
   f. Is the SIU currently in compliance?   Yes: _X__ No: ____

12. NARRATIVE SUMMARY:
   Carefully review the instructions to determine what must be discussed.
   If none of the instruction items (a-j) apply, check none here: _X__ NONE

SUMMARY: